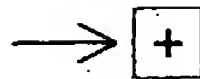


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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) OR	Attorney Docket Number	6033-020
	First Named Inventor	Frank CHILESE
	COMPLETE IF KNOWN	
	Application Number	New Application
	Filing Date	Herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**"APPARATUS AND METHOD FOR MAINTAINING UNIFORM AND
STABLE TEMPERATURE FOR CAVITY ENHANCED OPTICAL
SPECTROSCOPY"**

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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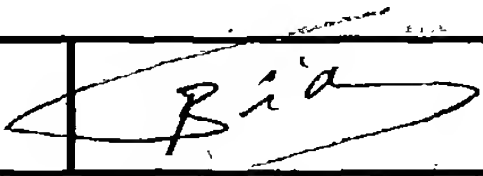
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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label <input type="text"/>				OR <input checked="" type="checkbox"/> Correspondence address below	
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Address		Suite 808			
City		State		ZIP	
San Jose		California		95113	
Country		Telephone		Fax	
U.S.		(408) 293-9934		(408) 293-2183	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Frank		Family Name CHILESE or Surname	
Inventor's Signature					Date 07/14/2003
Residence: City		State		Country	
San Ramon		CA		USA	
Residence: City		State		Country	
San Ramon		CA		USA	
Mailing Address		7366 Sedgefield Avenue			
Mailing Address					
City		State		ZIP	
San Ramon		CA		94583	
City		State		ZIP	
San Ramon		CA		94583	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Bernard		Family Name FIDRIC or Surname	
Inventor's Signature					Date 07/17/03
Residence: City		State		Country	
Cupertino		CA		USA	
Residence: City		State		Country	
Cupertino		CA		USA	
Mailing Address		11713 Westshore Court			
Mailing Address					
City		State		ZIP	
Cupertino		CA		95014	
City		State		ZIP	
Cupertino		CA		95014	
<input type="checkbox"/> Additional inventors are being named on the one supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

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PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035

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FRANK CHILESE, ET AL.	Application Number	New Application
	Filing Date	Herewith
	First Named Inventor	Frank CHILESE
	Group Art Unit	N/A
	Examiner Name	N/A
	Attorney Docket Number	6033-020

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

Place Customer
Number Bar Code
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Name	Registration Number
Herbert Burkard	24,500
John Schipper	26,994

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

☒ Firm or
Individual Name

LAW OFFICE OF JOHN SCHIPPER

Address 111 N. Market Street

Address Suite 808

City San Jose State California ZIP 95113

Country U.S.A.

Telephone (408) 293-9934 Fax (408) 293-2183

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Frank CHILESE
Signature	<i>Frank Chilese</i>
Date	07/14/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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FRANK CHILESE, ET AL.	Application Number	New Application
	Filing Date	Herewith
	First Named Inventor	Frank CHILESE
	Group Art Unit	N/A
	Examiner Name	N/A
	Attorney Docket Number	6033-020

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:

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Name	Registration Number
Herbert Burkard	24,500
John Schipper	26,994

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<input checked="" type="checkbox"/> Firm or Individual Name	LAW OFFICE OF JOHN SCHIPPER				
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Address	Suite 808				
City	San Jose	State	California	ZIP	95113
Country	U.S.A.				
Telephone	(408) 293-9934	Fax	(408) 293-2183		

I am the:

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Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Bernard FIDRIC
Signature	
Date	07/17/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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